Form **990-PF**

EXTENDED TO NOVEMBER 15, 2018 Return of Private Foundation

▶ Go to www.irs.gov/Form990PF for instructions and the latest information.

or Section 4947(a)(1) Trust Treated as Private Foundation ▶ Do not enter social security numbers on this form as it may be made public.

Department of the Treasury Internal Revenue Service

For cale	ndar year 2017 or tax year beginning		, and ending		
Name o	of foundation			A Employer identification	number
	BANYAN FOUNDATION			57-1222563	
	and street (or P.O. box number if mail is not delivered to street at 80 WILSHIRE BOULEVARD S		Room/suite	B Telephone number 310-446-71	29
	town, state or province, country, and ZIP or foreign p		<u> </u>	C If exemption application is pe	
	ANGELES, CA 90024				
G Chec	k all that apply: Initial return	Initial return of a f	ormer public charity	D 1. Foreign organizations	s, check here
	Final return	Amended return		Foreign organizations me check here and attach cor	eting the 85% test,
H Chec	Address change k type of organization: X Section 501(c)(3) ex	Name change		E If private foundation sta	
	-	Other taxable private found	ation	under section 507(b)(1)	
Fair m	arket value of all assets at end of year J Account	-	Accrual	F If the foundation is in a	
	Part II, col. (c), line 16) [0 4	ther (specify)	ic)	under section 507(b)(1)	(B), check here
▶\$ Part			(b) Net investment	(c) Adjusted net	(d) Disbursements
	(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).)	(a) Revenue and expenses per books	income	income	for charitable purposes (cash basis only)
1	Contributions, gifts, grants, etc., received	207,000.		N/A	
2	Check if the foundation is not required to attach Sch. B Interest on savings and temporary				
3 4	cash investments Dividends and interest from securities				
1 '	a Gross rents			REC	EIVED
- 1	Net rental income or (loss)			Attorney G	meral's Office
a) 68	Net gain or (loss) from sale of assets not on line 10				of series
Revenue 2	assets on line 6a		0.	MAR	2 7 2019
7 8	Capital gain net income (from Part IV, line 2) Net short-term capital gain		0.		
9	Income modifications		444	Registry of (trantable Trusts
10a	Gross sales less returns				
	Less: Cost of goods sold				
	Gross profit or (loss)				
11	***************************************	207,000.	0.		
12	Total. Add lines 1 through 11 Compensation of officers, directors, trustees, etc.	207,000.	0.		0.
14	Other employee salaries and wages				
15	Pension plans, employee benefits				
O3	Legal fees				
Den 1	o Accounting fees c Other professional fees STMT 1	24,000.	0.		0.
ш,		27,000	U•		
Administrative 12 0 18 19 19	Interest Taxes STMT 2	60.	0.		0.
19 19	Depreciation and depletion				
[20	Occupancy				
¥ 21	Travel, conferences, and meetings Printing and publications				
E 23	Other expenses STMT 3	7,819.	0.		0.
# 24	Total operating and administrative				
Operating and 24 25	expenses. Add lines 13 through 23	31,879.	0.		0.
20	Contributions, gifts, grants paid	36,584.			36,584.
26	•	68,463.	0.		36,584.
27	Add lines 24 and 25 Subtract line 26 from line 12:	00,403.	U •		20,204.
i	Excess of revenue over expenses and disbursements	138,537.			
	Net investment income (if negative, enter -0-)		0.		
	Adjusted net income (if negative, enter -0-)			N/A	- 000 55
723501 01	1-03-18 LHA For Paperwork Reduction Act Notice	e, see instructions.			Form 990-PF (2017)

Part II

Balance Sheets

Less: allowance for doubtful accounts

Less: allowance for doubtful accounts

11 Investments - land, buildings, and equipment: basis Less: accumulated depreciation

14 Land, buildings, and equipment basis Less: accumulated depreciation

instructions. Also, see page 1, item 1)

22 Other liabilities (describe

23 Total liabilities (add lines 17 through 22)

and complete lines 27 through 31.

16 Total assets (to be completed by all filers - see the

15 Other assets (describe ▶

20

Cash - non-interest-bearing

3 Accounts receivable ►

4 Pledges receivable ►

2 Savings and temporary cash investments

5 Grants receivable 6 Receivables due from officers, directors, trustees, and other disqualified persons 7 Other notes and loans receivable Less: allowance for doubtful accounts

8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Investments - U.S. and state government obligations b Investments - corporate stock c Investments - corporate bonds

12 Investments - mortgage loans

17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue

Mortgages and other notes payable

Foundations that do not follow SFAS 117, check here

Loans from officers, directors, trustees, and other disqualified persons

Foundations that follow SFAS 117, check here and complete lines 24 through 26, and lines 30 and 31. 24 Unrestricted 25 Temporarily restricted

26 Permanently restricted

13 Investments - other

Attached schedules and amounts in the description

column should be for end-of-year amounts only.

Beginning of year

(a) Book Value

205,517

205,517.

0.

4	Add lines 1, 2, and 3
5	Decreases not included in line 2 (itemize)
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, colum
72	3511 01-03-18

щ	1	and complete lines 27 through 31.	•		
ğ	27	Capital stock, trust principal, or current funds	0.	0.	
šet	28	Paid-in or capital surplus, or land, bldg., and equipment fund		0.	
Ass	29	Retained earnings, accumulated income, endowment, or other fund	205,517.	344,054.	
Net Assets or	30	Total net assets or fund balances	205,517.	344,054.	The production of the second
_	31	Total liabilities and net assets/fund balances	205,517.	344,054.	Constitution of the Consti
F	art	Analysis of Changes in Net Assets or Fun	nd Balances		
1	Tota	I net assets or fund balances at beginning of year - Part II, column (a	a), line 30		
	(mus	st agree with end-of-year figure reported on prior year's return)		<u></u>	205,517.
2	Ente		***************************************	I _	138,537.
3	Othe	r increases not included in line 2 (itemize)		3	0.
4	Add	lines 1, 2, and 3		4	344,054.
		eases not included in line 2 (itemize)		5	0.
6	Tota	I net assets or fund balances at end of year (line 4 minus line 5) - Pa	rt II, column (b), line 30	6	344,054.
_				· · · · · · · · · · · · · · · · · · ·	Form 990-PF (2017)
723	511 C	01-03-18			
			2		
01	111	4 151304 10220.2055	2017.05050 THE B	BANYAN FOUNDAT	TION 10220.

Part IV Capital Gains a	nd Los	ses for Tax on In	vestment	Income	Tass	U		
(a) List and describe the 2-story brick ware	ie kind(s) ehouse; o	of property sold (for exar r common stock, 200 shs.	nple, real est . MLC Co.)	ate,	(P) D	How acquired - Purchase - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a								
b NON	E							
C					<u> </u>			<u> </u>
<u>d</u>					<u> </u>			
<u>e</u>					1			<u> </u>
(e) Gross sales price		epreciation allowed (or allowable)		expense of sale			(h) Gain or (loss ((e) plus (f) minus	
1							 	
b								
С								
<u>d</u>					-			
<u>e </u>		1 (1) 1	l	40/04/00				
Complete only for assets showing						C	(I) Gains (Col. (h) gair ol. (k), but not less tha	n minus an -0-1 ar
(i) FMV as of 12/31/69) Adjusted basis as of 12/31/69		xcess of col. (i) r col. (j), if any		•	Losses (from col.	(h))
(,,		as 01 12/3 1/05	000	1 Col. (j), 11 ally				
<u>a</u>								
<u>b</u>								
<u>c</u>								
<u>d</u>								
<u>e</u>	<u>.</u>							
2 Capital gain net income or (net cap	ital lace)	If gain, also enter If (loss), enter -0-	in Part I, line	e 7		2		
- 1 3	,	•		<i>б /</i>	ا ر	-	······································	
Net short-term capital gain or (loss			d (6):		٦١			
If gain, also enter in Part I, line 8, c If (loss), enter -0- in Part I, line 8	olumn (c)).			 	2		
Part V Qualification Un	der Se	ction 4940(e) for	Reduced	Tax on Net	Inve	stment Inc	ome	
(For optional use by domestic private f								
, For optional use by domestic private i	ounuanoi	is subject to the section 4	340(a) lax oi	i net investment in	COIRC	-,		
If section 4940(d)(2) applies, leave this	s part blar	nk.						
Was the foundation liable for the section	n 4942 ta	ay on the distributable am	ount of any v	ear in the base ner	ind?			Yes X No
f "Yes," the foundation doesn't qualify						***************************************		
1 Enter the appropriate amount in ea					ntries.			
(a)	T	(b)		T	(c)			(d) bution ratio
Base periód years Calendar year (or tax year beginning	ı in)	Adjusted qualifying dist	tributions	Net value of no		itable-use asset	s (col. (b) di	bution ratio vided by col. (c))
2016	,,						/	(-//
2015		· · · · · ·						
2014		·- ·- ·- ·- ·- ·- ·- ·- ·- ·- ·- ·- ·- ·			-	·		
2013								
2012								-
LVIL				·				
2 Total of line 1, column (d)							2	
Average distribution ratio for the 5-							· - 	
the foundation has been in existence	•	•	-		_		3	
the foundation has been in existent	0 11 1033 1							
Finter the net value of noncharitable	-1156 2000	ts for 2017 from Part Y li	ine 5				4	
F Entor the net value of helicharitable	uso 4550	no for Eurr Hunt Falt A, II					··· - *	
Multiply line 4 by line 3							5	
Multiply line 4 by line 3							· J	
Enter 19/ of not investment income	(10/ of D	ort L line 27h)						
3 Enter 1% of net investment income	(1% 01 P	aili, IIIIt 2719)					6	
Add lines E and C							,	
7 Add lines 5 and 6					• • • • • • •		7	
B. Fuel and the day of the set of the	7-4 MI !!	4						
8 Enter qualifying distributions from I							. 8	
If line 8 is equal to or greater than I	ine 7, che	ck the box in Part VI, line	1b, and com	plete that part usin	ig a 19	% tax rate.		
See the Part VI instructions.								000 PE (001

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	September (2017) The BANTAN FOUNDATION	2000		. ago o
P	rt VII-A Statements Regarding Activities (continued)		V	NI-
			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
	section 512(b)(13)? If "Yes," attach schedule. See instructions	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?			
	If "Yes," attach statement. See instructions			X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► WWW.SUMMAKIDS.ORG			
14	The books are in care of ▶ J DREW DELISSER AND ASSOCIATES Telephone no. ▶ 310-2	83-8	<u> 201</u>	
	Located at ► 3717 E. THOUSAND OAKS BLVD, WESTLAKE VILLAGE, CA ZIP+4 ►9	1362		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here		▶	· 🔲
	and enter the amount of tax-exempt interest received or accrued during the year \bigsilon		/A	
16	At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority over a bank,		Yes	
	securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			
-	foreign country >			
Pe	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
18	During the year, did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person? Yes X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(5) Transfer any income or assets to a disqualified person (or make any of either available			
	for the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	if the foundation agreed to make a grant to or to employ the official for a period after			1 14 1
	termination of government service, if terminating within 90 days.)			
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations		40	
	section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions N/A	1b		
	Organizations relying on a current notice regarding disaster assistance, check here			
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			
	before the first day of the tax year beginning in 2017?	10		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation			
	defined in section 4942(j)(3) or 4942(j)(5)):			
8	At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning			
	before 2017? Yes X No			
	If "Yes," list the years			
þ	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect			33
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			
	statement - see instructions.) N/A	2b		
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
	• · · · · · · · · · · · · · · · · · · ·			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year?			
b	If "Yes," did it have excess business holdings in 2017 as a result of (1) any purchase by the foundation or disqualified persons after			
	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose			
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,			
	Form 4720, to determine if the foundation had excess business holdings in 2017.)	3b		
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		<u> </u>
þ	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that			
	had not been removed from jeopardy before the first day of the tax year beginning in 2017?	<u> 4b </u>		<u> </u>
	F	orm 990)-PF ((2017)

Part VII-B	Statements Regarding Activities for Which F	orm 4720 May Be R	equired _{(conti}	nued)		
5a During the	year, did the foundation pay or incur any amount to:				Yes	No
(1) Carry	on propaganda, or otherwise attempt to influence legislation (sectio	n 4945(e))?	🗀 Y	es X No		
(2) Influer	nce the outcome of any specific public election (see section 4955); o	or to carry on, directly or indire	ectly,			
any vo	ter registration drive?	***************************************	\	es X No		
(3) Provid	e a grant to an individual for travel, study, or other similar purposes	?	🗀 Y	res X No		
(4) Provid	e a grant to an organization other than a charitable, etc., organizatio	n described in section				
	d)(4)(A)? See instructions		🔲 ١	es X No		
	e for any purpose other than religious, charitable, scientific, literary,					
the pre	evention of cruelty to children or animals?		🔲 ١	es X No		
	rer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un					
section 53.	4945 or in a current notice regarding disaster assistance? See instr	uctions		N/A	5b	
Organizatio	ns relying on a current notice regarding disaster assistance, check	here		▶□		
c If the answ	er is "Yes" to question 5a(4), does the foundation claim exemption f	rom the tax because it maintai	ned			
expenditure	e responsibility for the grant?	N	[/A 🔲 \	res 🔲 No		
	ach the statement required by Regulations section 53.4945-5(d).					
	ndation, during the year, receive any funds, directly or indirectly, to	pay premiums on				
	benefit contract?			es X No		
	ndation, during the year, pay premiums, directly or indirectly, on a p				6b	X
	b, file Form 8870.					
	during the tax year, was the foundation a party to a prohibited tax s	shelter transaction?		es X No		
b If "Yes." did	the foundation receive any proceeds or have any net income attribu	Itable to the transaction?		N/A	7b	
Part VIII	Information About Officers, Directors, Trusto	es, Foundation Mar	nagers, Highly	,		
	Paid Employees, and Contractors					
1 List all office	ers, directors, trustees, and foundation managers and t	neir compensation.				
		(b) Title, and average hours per week devoted	(c) Compensation	(d) Contributions to employee benefit plan and deferred	s (e) Exp	ense
	(a) Name and address	to position	(If not paid, enter -0-)	and deferred compensation	allowa	
BRIAN WE	RDSHEIM	CHAIRMAN				
10880 W	LSHIRE BLVD.					
LOS ANGE	ELES, CA 90024	0.00	0.	0	•	0.
JIM MILE	as .	PRESIDENT				
10880 W	LSHIRE BLVD.	:				
LOS ANGE	LES, CA 90024	0.00	0.	0		0.
CARRIE F	CC WEST	EXECUTIVE DIR	ECTOR			
10880 W	LSHIRE BLVD.]				
LOS ANGE	LES, CA 90024	0.00	0.	0		0.
					İ	
2 Compensa	tion of five highest-paid employees (other than those inc		enter "NONE."	178		
(a) Nan	ne and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	s (e) Exp account,	ense other
(a) Nun	to and address of each omployee paid more than \$50,000	devoted to position	(C) Compensation	and deferred compensation	allowa	nces
NC	ONE				ļ	
				ļ <u></u>		
				1		
				<u> </u>		
					<u> </u>	
Total number of	other employees paid over \$50,000					0
				For	" gan_PF	(2017)

Total. Add lines 1 through 3

P	art X Minimum Investment Return (All domestic foundations	must complete this part	. Foreign four	ndations, see	instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charits	able, etc., purposes;			
·	and the second s			1a	0.
b	Average of monthly cash balances			1b	0.
c	Fair market value of all other assets			1c	0.
ď	Total (add lines 1a, b, and c)			1d	0.
_	Reduction claimed for blockage or other factors reported on lines 1a and				
_	1c (attach detailed explanation)	1e	0.		
2	Acquisition indebtedness applicable to line 1 assets			2	0.
3	Subtract line 2 from line 1d			3	0.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amou			4	
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and			5	0.
6	Minimum investment return. Enter 5% of line 5			6	0.
P	Distributable Amount (see instructions) (Section 4942(j)(3)			nd certain	
	foreign organizations, check here and do not complete this pa	irt.)			
1	Minimum investment return from Part X, line 6	,		1	0.
2a	Tax on investment income for 2017 from Part VI, line 5	2a			
b	Income tax for 2017. (This does not include the tax from Part VI.)	2b			
C	Add lines 2a and 2b			2c	0.
3	Distributable amount before adjustments. Subtract line 2c from line 1			3	0.
4	Recoveries of amounts treated as qualifying distributions			4	0.
5	Add lines 3 and 4	,,		5	0.
6	Deduction from distributable amount (see instructions)			6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Pa			7	0.
P	Qualifying Distributions (see instructions)		·····		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., pi			10	36 584
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26			1a 1b	36,584. 0.
Ъ	Program-related investments - total from Part IX-B			2	<u> </u>
2	Amounts paid to acquire assets used (or held for use) directly in carrying out chari	ianie, eic., purposes		-2	
3	Amounts set aside for specific charitable projects that satisfy the:			20	
8	Suitability test (prior IRS approval required)			3a 3b	
b	Cash distribution test (attach the required schedule)			4	36,584.
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; Foundations that qualify under section 4940(e) for the reduced rate of tax on net in			-	30,304.
5	• •			5	0.
_	income. Enter 1% of Part I, line 27b			6	36,584.
6	Adjusted qualifying distributions. Subtract line 5 from line 4				···
	4940(e) reduction of tax in those years.	when calculating whether the	ie rounuation t	quannes ioi the	agution
_	אסיונים ובמחפיותו מו ידי ווי וויספר אביום:				

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Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017
1 Distributable amount for 2017 from Part XI,		and the second second		0.
line 7 2 Undistributed income, if any, as of the end of 2017:				
a Enter amount for 2016 only			0.	
b Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2017:				and the second second
a From 2012				
b From 2013 7,500.				
c From 2014 1,012,500.				
d From 2015 7,300.	188			224
e From 2016 24,750.				
f Total of lines 3a through e	1,052,050.			
4 Qualifying distributions for 2017 from				
Part XII, line 4: ►\$ 36,584.			0.	
a Applied to 2016, but not more than line 2a			0.	
b Applied to undistributed income of prior		0.		
years (Election required - see instructions) c Treated as distributions out of corpus				
(Election required - see instructions)	0.		an e	
d Applied to 2017 distributable amount				0.
e Remaining amount distributed out of corpus	36,584.			
5 Excess distributions carryover applied to 2017 (If an amount appears in column (d), the same amount	0.			0.
must be shown in column (a).) 6 Enter the net total of each column as indicated below:				A Commence of the Commence of
& Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	1,088,634.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2016. Subtract line				
4a from line 2a. Taxable amount - see instr			0.	
f Undistributed income for 2017. Subtract			C.	
lines 4d and 5 from line 1. This amount must				0.
be distributed in 2018				0
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				100000
may be required - see instructions)	0.			
8 Excess distributions carryover from 2012				
not applied on line 5 or line 7	0.			100
9 Excess distributions carryover to 2018.				
Subtract lines 7 and 8 from line 6a	1,088,634.		344 14 24 25	100
10 Analysis of line 9:			Carlos Anna	
a Excess from 2013 7,500.		- Andrews Tr		TO THE STREET
b Excess from 2014 1,012,500.		gar militer		
c Excess from 2015 7,300.	7.84	Car Service		
d Excess from 2016 24,750. e Excess from 2017 36,584.	1.00		9-300	And the second s
e Excess from 2017 36,584.				Form 990-PF (2017)

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Supplementary Information (continued) Part XV 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Purpose of grant or contribution Foundation show any relationship to Amount status of any foundation manager Name and address (home or business) recipient or substantial contributor Paid during the year SUPPORT OF CHARTITABLE POF UNITED4 GOOD FOUNDATION NONE DRGANIZATION C/O ADAM BASS 3182 ABINGTON DRIVE 8,000. BEVERLY HILLS, CA 90210 SUPPORT OF CHARTITABLE POF THE B+ FOUNDATION NONE ORGANIZATION 101 ROCKLAND CIRCLE 1,000. WILMINGTON, DE 19803 LUZERNE MUSIC CENTER, INC. NONE POF SUPPORT OF CHARTITABLE ORGANIZATION 203 LAKE TOUR ROAD 14,334. LAKE LUZERNE, NY 12846 THE FULFILLMENT FUND NONE POF SUPPORT OF CHARTITABLE ORGANIZATION 6100 WILSHIRE BLVD, SUITE 600 5,000. LOS ANGELES, CA 90048 POF SUPPORT OF CHARTITABLE FAMILY LIVES ON FOUNDATION NONE ORGANIZATION PO BOX 494 1,000. LIONVILLE, PA 19353 ► <u>3a</u> SEE CONTINUATION SHEET(S) 36,584. Total Approved for future payment NONE Total Form **990-PF** (2017)

Part XVI-A Analysis of Income-Producing Activitie	Part XVI-A	Analysis	of Income	-Producing	Activities
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	Unrelated h	usiness income	Evelu	ded by section 512, 513, or 514	(4)
Enter gross amounts unless otherwise indicated.	(a) Business	(b)	(C) Exclu- sion	(d)	(e) Related or exempt
1 Program service revenue:	code	Amount	code	Amount	function income
a					
b					
6					
d					
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments 4 Dividends and interest from securities	-		 		
5 Net rental income or (loss) from real estate:			+		
a Debt-financed property			+		
b Not debt-financed property			+		
6 Net rental income or (loss) from personal					
property	l i		+		
7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory			+		
9 Net income or (loss) from special events			_ 		
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a	_				
b					
c	_				
d	[
			1		
e					
e		0		0.	0.
e					0.
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e)					
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.)			13	
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e))			13	
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations. Part XVI-B Relationship of Activities	to the Accom	plishment of Ex	æmpt	Purposes	0.
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities	to the Accom	plishment of Exolumn (e) of Part XVI-	æmpt	Purposes	0.
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in	to the Accom	plishment of Exolumn (e) of Part XVI-	æmpt	Purposes	0.
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in	to the Accom	plishment of Exolumn (e) of Part XVI-	æmpt	Purposes	0.
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e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in	to the Accom	plishment of Exolumn (e) of Part XVI-	æmpt	Purposes	0.
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in	to the Accom	plishment of Exolumn (e) of Part XVI-	æmpt	Purposes	0.
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in	to the Accom	plishment of Exolumn (e) of Part XVI-	æmpt	Purposes	0.
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e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in	to the Accom	plishment of Exolumn (e) of Part XVI-	æmpt	Purposes	0.

Form 990)-PF (2017) THE B	ANYAN FO	UNDATIO	N		57-12		Pa	ige 13
Part)	Information Re Exempt Organ	egarding Tra	nsfers to a	nd Transactions ar	nd Relationsh	nips With Noncha	ritable		
(ottl a Tra (1) (2) b Otth (1) (2) (3) (4) (5) (6) c Sha d If tl	the organization directly or indirectly organization of a control of a cont	nizations) or in sect lation to a noncharif able exempt organize bucharitable exempt , or other assets embership or fundr ailing lists, other as s "Yes," complete the foundation. If the fo	ration table exempt organization torganization aising solicitation sets, or paid eme following scheundation receive	g to political organizations? ganization of: ganizations ganizations ganizations ganizations ganizations	ways show the fair	market value of the good	1b(1) 1b(2) 1b(3) 1b(4) 1b(5) 1b(6) 1c s, other ass	Yes	X X X X X X X
(a) Line n	T			e exempt organization	(d) Description	on of transfers, transactions, ar	nd sharing arr	angemer	nts
(2)2	S. (B) Filliounic involvad	(4) /44	N/A	у					
			-1,7						
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in s	he foundation directly or indirected the foundation directly or indirected the following school (c) (other than section for the following school (c)	on 501(c)(3)) or in					Yes	X	No
וו ע	(a) Name of or			(b) Type of organization	Γ	(c) Description of relation	nship		
	N/A	<u> </u>		, , , , , , , , , , , , , , , , , , , ,	1				
······································	14/ A				 				
	····								
	Under penalties of perjury, I declare	that I have examined the	nis return, including	accompanying schedules and st	atements, and to the b	est of my knowledge			
Sign Here	and belief, it is true, correct, and cor					has any knowledge.	May the IRS of return with the shown below X Yes	e prepare ? See ins	er
	Signature of officer or truste	e		Date	Title	L			
	Print/Type preparer's n		Preparer's s	ignature	Date	Check if PTI self- employed			
Paid	J DELISSER			· · · · · · · · · · · · · · · · · · ·		P	<u>00070</u>	<u> 338</u>	
Prepa	arer Firm's name ►J.	DREW DEL	ISSER A	ND ASSOCIATES	S	Firm's EIN ▶ 82-	20200	14	

Phone no. 310-283-8201 Form **990-PF** (2017)

Preparer **Use Only**

Firm's address ▶ 3717 E. THOUSAND OAKS BLVD.

WESTLAKE VILLAGE, CA 91361

3 Grants and Contributions Paid During the	rear (Continuation)	4		
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount
AGOURA SOFTBALL	NONE	POF	SUPPORT OF CHARTITABLE	
28545 W. DRIVER AVENUE AGOURA HILLS, CA 91301			ORGANIZATION	1,00
HEAVEN ON EARTH	NONE	POF	SUPPORT OF CHARTITABLE	
7342 FULTON AVENUE NORTH HOLLYWOOD, CA 91605			ORGANIZATION	1,00
SMALL WONDERS FOUNDATION PO BOX 480185 LOS ANGELES, CA 90048	NONE	POF	SUPPORT OF CHARTITABLE ORGANIZATION	25
000 ANGELES, CA 20040				
BRIDGE BRIGADE, INC 17404 VENTURA BLVD, 2ND FLOOR	NONE	POF	SUPPORT OF CHARTITABLE ORGANIZATION	2.04
ENCINO, CA 91306				2,00
CONSERVATION INTERNATIONAL FOUNDATION ATTN: LUISA TAM 2011 CRYSTAL DRIVE,	NONE	POF	SUPPORT OF CHARTITABLE ORGANIZATION	
SUITE 500 ARLINGTON, VA 22202				3,00
Total from continuation sheets	<u> </u>			7,25

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF.

Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2017

Employer identification number Name of the organization 57-1222563 THE BANYAN FOUNDATION Organization type (check one): Filers of: Section: 501(c)(Form 990 or 990-EZ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF X 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. General Rule X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization

Employer identification number

IIID DANIAN I CONDILITOR	THE	BANYAN	FOUNDATION
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57-1222563

Part I	Contributors (see instructions). Use duplicate copies of Part I if addition	nal space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	STANLEY F. DRUICKENMILLER 10880 WILSHIRE BLVD. LOS ANGELES, CA 90024	\$ 100,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	THE EGDE CCN, LLC DBA THE KEY 265 HARTNELL PLACE SACRAMENTO, CA 95825	\$6,000. -	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	SETH MACFARLANE 1888 CENTURY PARK EAST, SUITE 900 LOS ANGELES, CA 90067	\$ 100,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	JEFF WERDESHEIM 26938 ALSACE DR. CALABASAS, CA 91302	\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		- - \$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
723452 11-01	1.17	Schedule B (Form	Person Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization

Employer identification number

THE BANYAN FOUNDATION

57-1222563

Part II	Noncash Property (see instructions). Use duplicate copies of P	art II it additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		s	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		s	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		s	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received

Employer identification number

HE BANY	AN FOUNDATION		57-1222563		
th co	e year from any one contributor. Complete completing Part III, enter the total of exclusively religious,	olumns (a) Inrougn (e) and the followin charitable, etc., contributions of \$1,000 or less	ection 501(c)(7), (8), or (10) that total more than \$1,000 for g line entry. For organizations for the year. (Enter this info. once.) \$\Bigsir \text{\$\frac{1}{2}}\$		
U	se duplicate copies of Part III if additiona	I space is needed.			
a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
		(e) Transfer of gift			
	Transferee's name, address, an	d ZIP + 4	Relationship of transferor to transferee		
a) No. from		(a) Han of wife	(d) Description of how gift is held		
Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of now girl is field		
		(e) Transfer of gift			
	Transferee's name, address, an		Relationship of transferor to transferee		
a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
		(e) Transfer of gift			
	Transferee's name, address, ar	ad ZIP + 4	Relationship of transferor to transferee		
a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
	(e) Transfer of gift				
-	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee		

FORM 990-PF (OTHER PROFESSIONAL FEES		STATEMENT 1	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
MANAGEMENT FEE	24,000.	0.		0.
TO FORM 990-PF, PG 1, LN 16C	24,000.	0.		0.
FORM 990-PF	TAXES		STATEMENT 2	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
STATE FILING FEES	60.	0.		0.
TO FORM 990-PF, PG 1, LN 18	60.	0.		0.
FORM 990-PF	OTHER E	XPENSES	S	TATEMENT 3
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ADVERTISING	7,769.	0.		0.
FILING FEES BANK CHARGES	30. 20.	0. 0.		0. 0.
TO FORM 990-PF, PG 1, LN 23	7,819.	0.		0.